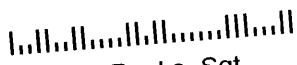


SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits



William Banks, Sgt.
Houston County Jail
901 E. Main Street
Dothan, AL 36301

A. Signature

X

B. Received by (Printed Name)

☐ Agent☐ Addressee

C. Date of Delivery

address different from item 1? ☐ Yes
or delivery address below: ☐ No

3. Service type

☒ Certified Mail☐ Registered☐ Insured Mail☐ Express Mail☒ Return Receipt for Merchandise☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes2. Article Number
(Transfer from service)

7006 2760 0005 4873 1246

102595-02-M-1540

PS Form 3811, February 2004

Domestic Return Receipt